

STATEMENT OF ORGANIZATION		OFFICE USE ONLY									
1. Name and Address of Committee L&H PAC (LOUISIANA LIFE & HEALTH PAC) 450 Laurel Street Suite 1400 Baton Rouge, LA 70801 Check If: New Committee <input type="checkbox"/>	2. Date of this Statement <div style="text-align: center;">1/24/2010</div>	Report Number: 17950 Date Filed: 1/24/2010									
	3. Estimated Membership <div style="text-align: center;">20</div>										
	4. Amended Statement? <div style="text-align: center;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>										
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>a. Name</u></td> <td style="width: 33%;"><u>b. Position</u></td> <td style="width: 34%;"><u>c. Address</u></td> </tr> <tr> <td>MIKE MULHEARN</td> <td>Chairperson</td> <td>PO Drawer 1411 Monroe, LA 71210-1411</td> </tr> <tr> <td>MR DAVID L RABENHORST</td> <td>Treasurer</td> <td>Rabenhorst Life Insurance Company P. O. Box 2666 Baton Rouge, LA 70821</td> </tr> </table> <p>Additional officers listed on attached sheet</p>			<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	MIKE MULHEARN	Chairperson	PO Drawer 1411 Monroe, LA 71210-1411	MR DAVID L RABENHORST	Treasurer	Rabenhorst Life Insurance Company P. O. Box 2666 Baton Rouge, LA 70821
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MIKE MULHEARN	Chairperson	PO Drawer 1411 Monroe, LA 71210-1411									
MR DAVID L RABENHORST	Treasurer	Rabenhorst Life Insurance Company P. O. Box 2666 Baton Rouge, LA 70821									
6. Affiliated Organizations <small>(Any organization other than a political committee which directly or indirectly established, administers, or financially supports this committee.)</small> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>a. Name</u></td> <td style="width: 33%;"><u>b. Address</u></td> <td style="width: 34%;"><u>c. Relationship to Committee</u></td> </tr> </table> <p>On attached sheet</p>			<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>						
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7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>a. Name</u></td> <td style="width: 33%;"><u>b. Address</u></td> </tr> </table> <p>On attached sheet</p>			<u>a. Name</u>	<u>b. Address</u>							
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8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: <input type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee											
b. Name of Candidate	c. Office Sought by the Candidate										
9. a. Name of Person Preparing Report JULIE FUSELIER b. Daytime Telephone											
10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief. This <u>24th</u> day of <u>January</u> , <u>2010</u> . <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <u>Mike Mulhearn</u> Signature of Committee/Chairperson </td> <td style="width: 50%; vertical-align: top;"> <u>318/329-0141</u> Daytime Telephone </td> </tr> <tr> <td style="vertical-align: top;"> <u>David L. Rabenhorst</u> Signature of Committee Treasurer, if any </td> <td style="vertical-align: top;"> <u>225/387-0171</u> Daytime Telephone </td> </tr> </table>			<u>Mike Mulhearn</u> Signature of Committee/Chairperson	<u>318/329-0141</u> Daytime Telephone	<u>David L. Rabenhorst</u> Signature of Committee Treasurer, if any	<u>225/387-0171</u> Daytime Telephone					
<u>Mike Mulhearn</u> Signature of Committee/Chairperson	<u>318/329-0141</u> Daytime Telephone										
<u>David L. Rabenhorst</u> Signature of Committee Treasurer, if any	<u>225/387-0171</u> Daytime Telephone										

5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)

a. <u>Name</u>	b. <u>Position</u>	c. <u>Address</u>
MS VIRGINIA K SHEHEE	Officer	Kilpatrick Life Insurance Company P. O. Box 88 Shreveport, LA 71161-0088
DES MOTHE	Officer	P.O. Box 2128 Gretna, LA 70054
PATRICK FONTENOT	Officer	P.O. Box 898 Opelousas, LA 70571-0898
MS PHYLLIS PERRON	Officer	451 Florida Street North Tower Suite 1400 Baton Rouge, LA 70801
BRIDGER EGLIN	Officer	P.O. Box 2231 Baton Rouge, LA 70821

6. Affiliated Organizations

(Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)

a. <u>Name</u>	b. <u>Address</u>	c. Relationship to Committee
LOUISIANA INSURERS' CONFERENCE	451 Florida Street North Tower Suite 1400 Baton Rouge, LA 70801	Trade Association

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)

a. <u>Name</u>	b. <u>Address</u>
CHASE	